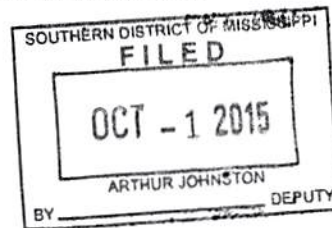


FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983
IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

COMPLAINT

K7688
 (Last Name) (Identification Number)
Brown Paul JR.
 (First Name) (Middle Name)
Kelly
 (Institution)



(Address)
 (Enter above the full name of the plaintiff prisoner, and address plaintiff in this action)

V.

CIVIL ACTION NUMBER:

3:15cv701-TS-RHW
 (to be completed by the Court)

MJC. Walnut CoveLepher Jenkins wardenT. Daniel majorCo. Benjamin

(Enter above the full name of the defendant or defendants in this action)

OTHER LAWSUITS FILED BY PLAINTIFF**NOTICE AND WARNING:**

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

- A. Have you ever filed any other lawsuits in a court of the United States? Yes (✓) No ()
- B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse side of this page or additional sheets of paper.)
- Parties to the action: Laurel county Billie Sallie, Gulan Cole Rochester anderson.
 - Court (if federal court, name the district; if state court, name the county): Souther District of MS.
 - Docket Number: Civil Action No: 4:13CV-105 DPT-FKB
 - Name of judge to whom case was assigned: MR. Keith Ball
 - Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?): Dismissed, Dont know why I was never informed

PARTIES

(In item I below, place your name and prisoner number in the first blank and place your present address in the second blank. Do the same for additional plaintiff, if any).

I. Name of plaintiff: Kelly Paul Brown Jr Prisoner Number: K7688

Address: _____

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions, and places of employment of any additional defendants.)

II. Defendant: Lepher Jenkins (Warden) is employed as

Warden at Walnut Grove

Correctional Facility 1650 Hwy 492 Walnut Grove MS 39189

The plaintiff is responsible for providing the court the name and address of each plaintiff(s) as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

PLAINTIFF:

NAME:

ADDRESS:

DEFENDANT(S):

NAME:

ADDRESS:

<u>CO. Beinhorn (C)</u>	<u>WCCF 1650 Hwy 492 Walnut Grove MS 39189</u>
<u>T. Daniel Major</u>	<u>WCCF 1650 Hwy 492 Walnut Grove MS 39189</u>
<u>L. Benton case manager</u>	<u>WCCF 1650 Hwy 492 Walnut Grove MS 39189</u>
<u>Sistank Investigator</u>	<u>WCCF 1650 Hwy 492 Walnut Grove MS 39189</u>
<u>Miss Evans (LT)</u>	<u>WCCF 1650 Hwy 492 Walnut Grove MS 39189</u>
<u>Capt Winbough (Capt)</u>	<u>WCCF 1650 Hwy 492 Walnut Grove MS 39189</u>
<u>CO. Morris (C.O.)</u>	<u>WCCF 1650 Hwy 492 Walnut Grove MS 39189</u>
<u>MTC Walnut Grove</u>	

GENERAL INFORMATION

- A. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
Yes (☒) No (☐)
- B. Are you presently incarcerated for a parole or probation violation?
Yes (☐) No (☒)
- C. At the time of the incident complained of in this complaint, were you an inmate of the Mississippi Department of Corrections (MDOC)?
Yes (☒) No (☐)
- D. Are you currently an inmate of the Mississippi Department of Corrections (MDOC)?
Yes (☒) No (☐)
- E. Have you completed the Administrative Remedy Program regarding the claims presented in this complaint?
Yes (☒) No (☐), if so, state the results of the procedure: Both was denied
-

F. If you are not an inmate of the Mississippi Department of Corrections, answer the following questions:

1. Did you present the facts relating to your complaint to the administrative or grievance procedure in your institution?
Yes (☐) No (☐)
2. State how your claims were presented (written request, verbal request, request for forms): _____

3. State the date your claims were presented: _____
4. State the result of the procedure: _____

STATEMENT OF CLAIM

- III. State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet if necessary.)

On or about 7/14/15 I requested to be moved from my zone (8A) to segregation because of hits placed on my life by two inmates and 3 officers. I told this to LT Evans, Capt Winbough they moved me to (8-D seg) on or about 7/17/15 one of the officers that I requested to be housed separate from came on the zone and worked he told me he heard what I told the capt and LT and he or his partners would get me in time I filed an ARP and wrote request informing staff of this. On or about 7/25/15 Co Benimon works my zone again and during feeding he handed me my tray and told me he spit in my food to enjoy. I stuck my arm out the tray hole and requested to speak to LT or Capt. He tells me to move my arm or he'll kick it out. I told him to get someone down here he steps back and slams the lid closed on my arm several times. (comarris/tower officer) sees him and called LT and capt down. They came and took me to medical took pictures. Co Benimon admitted to slamming my arm in the tray hole they placed him admin leave right then. I filed ARPs before and after the incident my case needs RELIEF manager L Benen wouldn't help me at all. I have both ARPs and all request

- IV. State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

Fifty thousand dollars ^{and} monetary and punitive damages what other relief the court should grant

Signed this 28 day of September, 20 15

Kelly Paul Braun Jr K7688

J WCCF E 201

2994 US Hwy 61 north woodville ms 39669

Signature of plaintiff, prisoner number and address of plaintiff

I declare under penalty of perjury that the foregoing is true and correct.

9-28-15
(Date)

Kelly P Braun Jr K7688
Signature of plaintiff